STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses

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	2010	for LOB (RSA Cha		RECEIVE
# 1116	PLEASE PRINT			OCT 2 5 2018
I. Name of Lobbyist(s) Michele Merritt			NEW HAMPSHIR DEPARTMENT OF S
II. Name of lobbyist'	s partnership, firm or corp	poration, if any:		
(Nar	ne of partnership, firm or corpo	oration)		
Business Address: (St	reet) (Town/City)	(State)	(Zip Code)
()(Telephone)	()_	(Fax)	e-mail	
reportable expense to	overs: (Choose one – file se ransactions which are not a sactions occurring in the mo	attributable to any o	one client).	
New Fu	tures, Inc. (Full Name of Client as it ap	nears on the Lobbyist R	egistration Form)	
<u>OR</u>	(ran range of onem as it up	pouro en uio zecegiot r	ogiou anon i onny	
☐ All reportable transunrelated to any partic	sactions by the lobbyist (incoular client.	luding the lobbyist's	family), or the lobbying fi	rm listed below which are
IV. Date of Report Reports cover: activ	April 25, 2018 ity from date of registration to	3/31/18 activ	July 25, 2018	
	October 31, 2018 \(\sqrt{2} \) activity from 7/1/18 to 9/30/18	activ	January 30, 2019 ☐ http://www.from.10/1/18 to 12/31/18	
	no fees received and no complete just this form and			

Concord, NH 03301:

VI.	Check if additional reports are attached:
	If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses
	If you have paid an honorarium or reimbursed expenses, you must file Addendum B-Report of Honorariums or
Exp	pense Reimbursement
П	If you your firm or your family has made political contributions, you must file Addendum C- Political Contribution

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

Michele Merritt

(Print Name of lobbyist)

(Signature of lobbyist)

P E A S E P R N T

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Michele D. Merritt	DEPARTMENT OF
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	v. 1 - i.
III. Name of Client New Futures, Inc.	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a)\$ 256.67
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ <u>2658.32</u>
c) Total of all fees received to date (Add lines a and b)	0)8 2914,99
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to represes. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid aggregate total of all expenses; (b) the aggregate total of all e: meals purchased during a business as than \$10 that is given to the person d with a value of \$25.00 or less); and rting period of greater than \$25.00 for e of greater than \$25, purchase of a r than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 17.56 b) \$ 135.31
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b)s 135.31
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d)s 152.81
(Add lines a, b and c) e) Total-of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report	e)s_1679.66
f) Total of all expenses year to date	ns 1832.53
VI. Other Expenses. ? Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	
Paid to:	Amount:
	\$
	·
	\$
A CONTRACT OF THE PROPERTY OF	\$
en e	
Sworn Statement/Affirmation by Lobbyist	e general and a little
I have need DOA 15 DOA 15 D and DOA 664 and harshy sweet on a fi	irm that the foregoing information
I have read KSA 13, KSA 13-B and KSA 004 and hereby swear or all	
is true and complete to the best of my knowledge and belief.	
s true and complete to the best of my knowledge and belief.	10.17.18
is true and complete to the best of my knowledge and belief. (Signature of lobbyist)	10·17·18 (Date)
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is true and complete to the best of my knowledge and belief. (Signature of lobbyist) Michele D. Merritt (Print Name of lobbyist)	10.17.18 (Date)
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